

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1445 Ross Avenue
Suite 1400
 Check if different than previously reported. (ACC)
Dallas TX 75202-2703

2. **FEC IDENTIFICATION NUMBER** C00119354
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 08 01 2011 through 08 31 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Todd Plott

Signature of Treasurer Electronically Filed by Mr. Todd Plott Date 09 19 2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		78498.04
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	104827.89									
(c) Total Receipts (from Line 19)	10959.70	103821.95								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	115787.59	182319.99								
7. Total Disbursements (from Line 31)	200.00	66732.40								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	115587.59	115587.59								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	8821.00	71413.00
(ii) Unitemized	2138.70	32408.95
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10959.70	103821.95
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	10959.70	103821.95
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10959.70	103821.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10959.70	103821.95

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	56000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	200.00	10732.40
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	200.00	66732.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	200.00	66732.40

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	10959.70	103821.95
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10959.70	103821.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
JAIKUMAR KRISHNASWAMY
 Mailing Address 13123 AVALANGE COURT
 City State Zip Code
 CYPRESS TX 77429-4913
 Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 3 1 / 2 0 1 1
Transaction ID: PR1025621126506
 Amount of Each Receipt this Period
 38.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CYPRESS FAIRBANKS MEDICAL COO
 CENTER
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 342.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
KEVIN MCCASLIN
 Mailing Address 5225 MAPLE AVENUE #4314
 City State Zip Code
 DALLAS TX 75235-8449
 Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 3 1 / 2 0 1 1
Transaction ID: PR1026156826506
 Amount of Each Receipt this Period
 192.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORAT- DIR COMPLIANCE
 ION
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1728.00
 P/R Deduction (\$96.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
ROBERT RUSSELL
 Mailing Address 1001 SARANAC PARK
 City State Zip Code
 PEACHTREE CITY GA 30269-1274
 Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 3 1 / 2 0 1 1
Transaction ID: PR1159116226506
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SOUTH FULTON MEDICAL CENT- COO
 ER
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 280.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) SHELLEY GILES		Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 3803 STOCKTON LN		Transaction ID: PR1479664426506
	City DALLAS	State TX	Zip Code 75287-4919
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer TENET HEALTHCARE CORPORAT- ION		Occupation DIR	P/R Deduction (\$20.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

B.	Full Name (Last, First, Middle Initial) JEFFREY KOURY		Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 42 BARNEBURG		Transaction ID: PR1481203526506
	City DOVE CANYON	State CA	Zip Code 92679-4210
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.00
Name of Employer TENET HEALTHCARE CORPORAT- ION		Occupation VP AND REGIONAL CFO	P/R Deduction (\$38.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 684.00		

C.	Full Name (Last, First, Middle Initial) MICHAEL K BURTNETT		Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 1131 N. EDGEFIELD AVE		Transaction ID: PR1568624526506
	City DALLAS	State TX	Zip Code 75208-3624
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.00
Name of Employer TENET HEALTHCARE CORPORAT- ION		Occupation VP	P/R Deduction (\$38.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 684.00		

SUBTOTAL of Receipts This Page (optional)	▶	192.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CARLOS A DUBE</p> <p>Mailing Address 10172 SAIGON DR</p> <p>City State Zip Code EL PASO TX 79925-5428</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL</p> <p>Occupation DIR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 228.00</p>	<p>Date of Receipt 08 / 31 / 2011</p> <p>Transaction ID: PR1568782026506</p> <p>Amount of Each Receipt this Period 38.00</p> <p>P/R Deduction (\$19.00 Bi-Weekly)</p>
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<p>B. Full Name (Last, First, Middle Initial) THOMAS RICE</p> <p>Mailing Address 15126 FERDINAND DR</p> <p>City State Zip Code DALLAS TX 75248-6437</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer TENET HEALTHCARE CORPORAT-ION</p> <p>Occupation SVP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 694.00</p>	<p>Date of Receipt 08 / 31 / 2011</p> <p>Transaction ID: PR1592856026506</p> <p>Amount of Each Receipt this Period 78.00</p> <p>P/R Deduction (\$39.00 Bi-Weekly)</p>
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<p>C. Full Name (Last, First, Middle Initial) JEFFREY NIEMAN</p> <p>Mailing Address 1823 COUNTRYSIDE</p> <p>City State Zip Code CARROLLTON TX 75007-1418</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer TENET HEALTHCARE CORPORAT-ION</p> <p>Occupation VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 209.00</p>	<p>Date of Receipt 08 / 31 / 2011</p> <p>Transaction ID: PR1592857426506</p> <p>Amount of Each Receipt this Period 38.00</p> <p>P/R Deduction (\$19.00 Bi-Weekly)</p>
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SUBTOTAL of Receipts This Page (optional)	154.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT SMITH

Mailing Address 5325 TATE AVE

City PLANO State TX Zip Code 75093-3433

FEC ID number of contributing federal political committee. **C**

Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt 08 / 31 / 2011
Transaction ID: PR1592857726506
 Amount of Each Receipt this Period 80.00
 P/R Deduction (\$40.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
RICKY JOHNSTON

Mailing Address 404 N.CHURCH ST

City MCKINNEY State TX Zip Code 75069-3855

FEC ID number of contributing federal political committee. **C**

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 810.00

Date of Receipt 08 / 31 / 2011
Transaction ID: PR1592858226506
 Amount of Each Receipt this Period 90.00
 P/R Deduction (\$45.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
JAY MIRANDA

Mailing Address 15871 SW 148 TERRACE

City MIAMI State FL Zip Code 33196-5701

FEC ID number of contributing federal political committee. **C**

Name of Employer CORAL GABLES HOSPITAL Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt 08 / 31 / 2011
Transaction ID: PR1734839226506
 Amount of Each Receipt this Period 80.00
 P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) LEAD FOURKILLER		Date of Receipt
	Mailing Address 13219 GEORGE STREET		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 31 / 2011
	City	State	Zip Code
	FARMERS BRANCH	TX	75234-5206
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1735529126506
Name of Employer TENET HEALTHCARE CORPORATION		Occupation SR DIR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 747.00	<input type="text"/> 88.00
			P/R Deduction (\$44.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) JASON E EVANS		Date of Receipt
	Mailing Address 1808 FLINT RIDGE DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 31 / 2011
	City	State	Zip Code
	ALLEN	TX	75002-1567
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1735905226506
Name of Employer LAKE POINTE MEDICAL CENTER		Occupation COO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 342.00	<input type="text"/> 38.00
			P/R Deduction (\$19.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) JEREMY L CLARK		Date of Receipt
	Mailing Address 3336 SUNNIROC ROAD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 31 / 2011
	City	State	Zip Code
	BIRMINGHAM	AL	35210-3799
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1735911026506
Name of Employer BROOKWOOD MEDICAL CENTER		Occupation ASSOCIATE ADMINISTRATOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 330.00	<input type="text"/> 60.00
			P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 186.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) DANIEL WALDMANN		Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 1111 MONTCLAIR AVENUE		Transaction ID: PR1814798526506
	City DALLAS	State TX	Zip Code 75208-7114
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.00
	Name of Employer TENET HEALTHCARE CORPORATION	Occupation VP, GOVERNMENT RELATIONS	P/R Deduction (\$96.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1728.00		

B.	Full Name (Last, First, Middle Initial) ALBERT BARROCAS		Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 4050 SPALDING DR		Transaction ID: PR2069711426506
	City ATLANTA	State GA	Zip Code 30350-1100
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.00
	Name of Employer SOUTH FULTON MEDICAL CENTER	Occupation CMO	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00		

C.	Full Name (Last, First, Middle Initial) MARK P LISA		Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 391 E MILGEO AVE		Transaction ID: PR2174141226506
	City RIPON	State CA	Zip Code 95366-2120
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.00
	Name of Employer DOCTORS HOSPITAL OF MANTECA	Occupation CEO	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00		

SUBTOTAL of Receipts This Page (optional)	▶	268.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 39
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ROBERT J CUNNAH

Mailing Address 163 VILLAGIO WEST

City PALM SPRINGS State CA Zip Code 92262-6395

FEC ID number of contributing federal political committee. **C**

Name of Employer DESERT REGIONAL MEDICAL CENTER Occupation CMO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 31 / 2011

Transaction ID: PR2174361626506

Amount of Each Receipt this Period 100.00

P/R Deduction (\$50.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
WADE TYRRELL

Mailing Address 7844 ANNA CALLA WAY

City BARTLETT State TN Zip Code 38133-5812

FEC ID number of contributing federal political committee. **C**

Name of Employer SAINT FRANCIS HOSPITAL-BARTLETT Occupation CNO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 702.00

Date of Receipt 08 / 31 / 2011

Transaction ID: PR2174470726506

Amount of Each Receipt this Period 78.00

P/R Deduction (\$39.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
CATHRYN H FRASER

Mailing Address 272 ENCLAVES COURT

City COPPELL State TX Zip Code 75019-2125

FEC ID number of contributing federal political committee. **C**

Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, HUMAN RESOURCES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1728.00

Date of Receipt 08 / 31 / 2011

Transaction ID: PR2174559926506

Amount of Each Receipt this Period 192.00

P/R Deduction (\$96.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **370.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) ALVIN W JOSEPHS	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 3717 HERWOL AVE	Transaction ID: PR2174561226506
	City State Zip Code WACO TX 76710-7218	Amount of Each Receipt this Period 78.00
	FEC ID number of contributing federal political committee. C	
Name of Employer TENET HEALTHCARE CORPORAT- ION	Occupation SR DIR	P/R Deduction (\$39.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 702.00	

B.	Full Name (Last, First, Middle Initial) BIGGS C PORTER	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 4535 MANNING LANE	Transaction ID: PR2174563626506
	City State Zip Code DALLAS TX 75220-6434	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
Name of Employer TENET HEALTHCARE CORPORAT- ION	Occupation CHIEF FINANCIAL OFFICER	P/R Deduction (\$100.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

C.	Full Name (Last, First, Middle Initial) JEFFERY FLOCKEN	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 27 NEW DAWN	Transaction ID: PR2174567326506
	City State Zip Code IRVINE CA 92620-1976	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
Name of Employer TENET HEALTHCARE CORPORAT- ION	Occupation SVP, REGIONAL OPERATIONS	P/R Deduction (\$100.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

SUBTOTAL of Receipts This Page (optional)	478.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 39
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
PATRICIA SECHI

Mailing Address 1850 S. OCEAN DRIVE
#1802

City State Zip Code
HALLANDALE BEACH FL 33009-7680

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORTH SHORE MEDICAL CENTER ASSOCIATE ADMINISTRATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 1

Transaction ID: PR2216476826506

Amount of Each Receipt this Period
38.00

P/R Deduction (\$19.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
SALLY A HURT-STEFFEN

Mailing Address 712 WALTHAM CT

City State Zip Code
EL PASO TX 79922-2128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SIERRA PROVIDENCE EASTSIDE HOSPITAL CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 1

Transaction ID: PR2248480226506

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
RUBEN O RODRIGUEZ

Mailing Address 6905 VILLA HERMOSA

City State Zip Code
EL PASO TX 79912-2341

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SIERRA PROVIDENCE EASTSIDE HOSPITAL DIR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 1

Transaction ID: PR2248482526506

Amount of Each Receipt this Period
38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **176.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
RICHARD E GLANCEY

Mailing Address 6516 VASCO WAY

City State Zip Code
EL PASO TX 79912-1709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SIERRA MEDICAL CENTER DIR PUBLIC RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 702.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR2284144026506

Amount of Each Receipt this Period
78.00

P/R Deduction (\$39.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
BRADLEY C TAYLOR

Mailing Address 9438 THORNBERRY LANE

City State Zip Code
DALLAS TX 75220-5145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TENET HEALTHCARE CORPORAT- SR DIR
ION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR2284285126506

Amount of Each Receipt this Period
38.00

P/R Deduction (\$19.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
DIANE KEENER

Mailing Address 8140 SANTA ROSA ROAD

City State Zip Code
ATASCADERO CA 93422-4942

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TWIN CITIES COMMUNITY HOS- DIR
PITAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 702.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR2284585526506

Amount of Each Receipt this Period
78.00

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **194.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 39
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICHAEL BLACKBURN

Mailing Address 4141 16TH STREET NE

City State Zip Code
HICKORY NC 28601-8408

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FRYE REGIONAL MEDICAL CENTER CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 684.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR2369304326506

Amount of Each Receipt this Period
76.00

P/R Deduction (\$38.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
JOHN SHORT

Mailing Address 3108 CLYMER DRIVE

City State Zip Code
PLANO TX 75025-5325

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TENET HEALTHCARE CORPORATION VP - PMI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 702.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR2387796626506

Amount of Each Receipt this Period
78.00

P/R Deduction (\$39.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
PAUL CASTANON

Mailing Address 6307 PRESTON PARKWAY

City State Zip Code
DALLAS TX 75205-1650

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TENET HEALTHCARE CORPORATION VP & ASST GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR2398953026506

Amount of Each Receipt this Period
38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **192.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) STEPHEN D. PRESTON	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 3680 VILLAGE CENTER LANE	Transaction ID: PR2428718426506
	City State Zip Code BIRMINGHAM AL 35226-6343	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer BROOKWOOD MEDICAL CENTER	Occupation VP External Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 323.00	

B.	Full Name (Last, First, Middle Initial) MR MICHAEL R HOLMES	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 4241 VETERANS BLVD #200	Transaction ID: PR2440288726506
	City State Zip Code METAIRIE LA 70006	Amount of Each Receipt this Period 76.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$38.00 Bi-Weekly)
Name of Employer DIAGNOSTIC IMAGING SERVICES	Occupation CEO DIS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 684.00	

C.	Full Name (Last, First, Middle Initial) KELVIN BAGGETT	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 5721 EDMONDSON ROAD PK #205	Transaction ID: PR2444580826506
	City State Zip Code NASHVILLE TN 37211-6563	Amount of Each Receipt this Period 78.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$39.00 Bi-Weekly)
Name of Employer TENET HEALTHCARE CORPORATION	Occupation CHIEF MEDICAL OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 702.00	

SUBTOTAL of Receipts This Page (optional)	▶	192.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 39
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
TYLER MURPHY

Mailing Address 108 LONDONBERRY TERRACE

City SOUTHLAKE State TX Zip Code 76092-7321

FEC ID number of contributing federal political committee. **C**

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP/TREASURER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2011
Transaction ID: PR2444580926506
Amount of Each Receipt this Period 38.00
P/R Deduction (\$19.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
MR. JAMES MIKE THATCHER

Mailing Address 2904 CROOKED STICK

City PLANO State TX Zip Code 75093-6352

FEC ID number of contributing federal political committee. **C**

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2011
Transaction ID: PR2460337926506
Amount of Each Receipt this Period 38.00
P/R Deduction (\$19.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
MR. JAMES M. COWLING

Mailing Address 111 SUNSET COVE LANE

City PALM BEACH GARDENS State FL Zip Code 33418-4607

FEC ID number of contributing federal political committee. **C**

Name of Employer PALM BEACH GARDENS MEDICAL CENTER Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2011
Transaction ID: PR2460338226506
Amount of Each Receipt this Period 38.00
P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 114.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DENISE BERGER

Mailing Address 1504 COUNTRY BEND

City State Zip Code
SAINT CHARLES MO 63303-2512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DES PERES HOSPITAL HOSPITAL COMPLIANCE OFFICER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 1

Transaction ID: PR2492160326506

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
RONALD GROEPPER

Mailing Address 21037 X STREET

City State Zip Code
ELKHORN NE 68022-3127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CREIGHTON UNIVERSITY MEDICAL CENTER COO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 1

Transaction ID: PR2497625826506

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
LUIS ALFONSO

Mailing Address 7 SW 97TH COURT

City State Zip Code
MIAMI FL 33174-3527

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PALMETTO GENERAL HOSPITAL PHARMACIST-CLINICAL

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 1

Transaction ID: PR2542051426506

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶

290.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MICHAEL HALTER	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 111 RIGHTERS MILL RD	Transaction ID: PR406763226506
	City State Zip Code PENN VALLEY PA 19072-1312	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
Name of Employer HAHNEMANN UNIVERSITY HOSPITAL	Occupation CEO	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	

B.	Full Name (Last, First, Middle Initial) LEONARD ROSENFELD	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 7243 BAXTERSHIRE DRIVE	Transaction ID: PR407201326506
	City State Zip Code DALLAS TX 75230-3170	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
Name of Employer TENET HEALTHCARE CORPORATION	Occupation VP	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.00	

C.	Full Name (Last, First, Middle Initial) THOMAS WOLF	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 2613 MILLINGTON DRIVE	Transaction ID: PR407205126506
	City State Zip Code PLANO TX 75093-3560	Amount of Each Receipt this Period 32.00
	FEC ID number of contributing federal political committee. C	
Name of Employer TENET HEALTHCARE CORPORATION	Occupation MGR	P/R Deduction (\$16.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.00	

SUBTOTAL of Receipts This Page (optional)	108.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 39
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
STEVE BROWN

Mailing Address 16 SARAH NASH CT

City State Zip Code
DALLAS TX 75225-2072

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TENET HEALTHCARE CORPORATION EVP, CHIEF INFO OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3420.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR407210626506

Amount of Each Receipt this Period
380.00

P/R Deduction (\$190.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
JOHN B MCDONALD

Mailing Address 2230 WARNER ROAD

City State Zip Code
FORT WORTH TX 76110-1752

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TENET HEALTHCARE CORPORATION VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 684.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR407215826506

Amount of Each Receipt this Period
76.00

P/R Deduction (\$38.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
SHERRY J HENDERSON

Mailing Address 25 NIGHT HERON PL

City State Zip Code
HICKORY NC 28601-8806

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FRYE REGIONAL MEDICAL CENTER CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR407219726506

Amount of Each Receipt this Period
40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **496.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JAMES E MCPARTLAND

Mailing Address 1805 LONGWOOD CT

City State Zip Code
ALLEN TX 75013-3074

FEC ID number of contributing federal political committee. **C**

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
342.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 31 / 2011

Transaction ID: PR407221526506

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
JOE D THOMASON

Mailing Address 4006 RAMSGATE CT

City State Zip Code
COLLEYVILLE TX 76034-4473

FEC ID number of contributing federal political committee. **C**

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
684.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 31 / 2011

Transaction ID: PR407222126506

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
ROBERT S HENDLER

Mailing Address 11122 W RICKS CIRCLE

City State Zip Code
DALLAS TX 75230-3032

FEC ID number of contributing federal political committee. **C**

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
REGIONAL CMO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 31 / 2011

Transaction ID: PR407222826506

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶

214.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) CONLEY S CERVANTES	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 819 CAMBRIDGE MANOR LANE	Transaction ID: PR407224726506
	City State Zip Code COPPELL TX 75019-6105	Amount of Each Receipt this Period 24.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$12.00 Bi-Weekly)
Name of Employer TENET HEALTHCARE CORPORATION	Occupation SR DIR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

B.	Full Name (Last, First, Middle Initial) DOUGLAS E RABE	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 9923 CAPRIDGE DR	Transaction ID: PR407227326506
	City State Zip Code DALLAS TX 75238-3469	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer TENET HEALTHCARE CORPORATION	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

C.	Full Name (Last, First, Middle Initial) MICHAEL S HONGOLA	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 6704 WESTMONT DRIVE	Transaction ID: PR407227626506
	City State Zip Code COLLEYVILLE TX 76034-7263	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer TENET HEALTHCARE CORPORATION	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional)	▶	104.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
GARY K RUFF

Mailing Address 714 KENT CT

City State Zip Code
SOUTHLAKE TX 76092-8868

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TENET HEALTHCARE CORPORATION SVP & GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3456.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2011

Transaction ID: PR407229226506

Amount of Each Receipt this Period
384.00

P/R Deduction (\$192.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
WILLIAM T MOORE

Mailing Address 3014 CASTLE PINES DRIVE

City State Zip Code
DULUTH GA 30097-2039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ATLANTA MEDICAL CENTER MARKET CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2011

Transaction ID: PR407231826506

Amount of Each Receipt this Period
40.00

P/R Deduction (\$20.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
JOHN QUINN

Mailing Address 1138 PINE VALLEY ROAD

City State Zip Code
GRIFFIN GA 30224-4953

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SPALDING REGIONAL HOSPITAL CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1684.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2011

Transaction ID: PR407236026506

Amount of Each Receipt this Period
76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **500.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 / 39
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) CHARLES MILLER		Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 747 MENDENHALL CT		Transaction ID: PR407241426506
	City State Zip Code FORT MILL SC 29715-7852	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.00
	Name of Employer Occupation PIEDMONT MEDICAL CENTER MARKET CEO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00
			P/R Deduction (\$19.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) JOHN F HOLLAND		Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 3610 EDGEWATER STREET		Transaction ID: PR407242926506
	City State Zip Code DALLAS TX 75205-4317	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 192.00
	Name of Employer Occupation TENET HEALTHCARE CORPORAT-ION SVP, REGIONAL OPERATIONS	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1728.00
			P/R Deduction (\$96.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) JAMES D DORIS		Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 264 IDLEWILDE LANE		Transaction ID: PR407244826506
	City State Zip Code SANFORD NC 27332-9304	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 70.00
	Name of Employer Occupation CENTRAL CAROLINA HOSPITAL CEO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00
			P/R Deduction (\$35.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
RALPH ALEMAN
 Mailing Address 6301 COLLINS AVE #2608
 City State Zip Code
 MIAMI BEACH FL 33141-4645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HIALEAH HOSPITAL CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00
 Date of Receipt: 08 / 31 / 2011
Transaction ID: PR407245326506
 Amount of Each Receipt this Period: 40.00
 P/R Deduction (\$20.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
DAVID L ARCHER
 Mailing Address 2594 HOCKSETT COVE
 City State Zip Code
 GERMANTOWN TN 38139-6655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SAINT FRANCIS HOSPITAL MARKET CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1728.00
 Date of Receipt: 08 / 31 / 2011
Transaction ID: PR407250426506
 Amount of Each Receipt this Period: 192.00
 P/R Deduction (\$96.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
STEPHEN L NEWMAN MD
 Mailing Address 11034 TIBBS STREET
 City State Zip Code
 DALLAS TX 75230-3450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORAT-
 ION CHIEF OPERATING OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3456.00
 Date of Receipt: 08 / 31 / 2011
Transaction ID: PR407257726506
 Amount of Each Receipt this Period: 384.00
 P/R Deduction (\$192.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 616.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) ALAN R CASON		Date of Receipt
	Mailing Address 112 GOLDEN PHEASANT ST		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	SLIDELL	LA	70461-3116
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: PR407263526506
Name of Employer NORTHSHORE REGIONAL MEDICAL CENTER		Occupation CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="38.00"/>
		<input type="text" value="351.00"/>	P/R Deduction (\$19.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) TERRY WHEELER		Date of Receipt
	Mailing Address 13802 MAGNOLIA MANOR		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	CYPRESS	TX	77429-8162
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: PR407265626506
Name of Employer CYPRESS FAIRBANKS MEDICAL CENTER		Occupation CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="70.00"/>
		<input type="text" value="630.00"/>	P/R Deduction (\$35.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) GARY L HONTS JR.		Date of Receipt
	Mailing Address 1855 SILVERWINGS CT		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	MORGAN HILL	CA	95037-9002
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: PR407266426506
Name of Employer COMMUNITY HOSPITAL OF LOS GATOS		Occupation CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="60.00"/>
		<input type="text" value="540.00"/>	P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="168.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICHELE C MEYER
 Mailing Address 230 GRIMSLEY STAT BLUFF
 City SAINT LOUIS State MO Zip Code 63129-5030
 Date of Receipt 08 / 31 / 2011
 Transaction ID: PR407268526506
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)
 FEC ID number of contributing federal political committee. C
 Name of Employer DES PERES HOSPITAL Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 684.00

B. Full Name (Last, First, Middle Initial)
CRAIG C ARMIN
 Mailing Address 23510 BERDON STREET
 City WOODLAND HILLS State CA Zip Code 91367-3004
 Date of Receipt 08 / 31 / 2011
 Transaction ID: PR407274126506
 Amount of Each Receipt this Period 80.00
 P/R Deduction (\$40.00 Bi-Weekly)
 FEC ID number of contributing federal political committee. C
 Name of Employer TENET HEALTHCARE CORPORAT-ION Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 720.00

C. Full Name (Last, First, Middle Initial)
KENT G CLAYTON
 Mailing Address 3 TURTLE BAY DRIVE
 City NEWPORT BEACH State CA Zip Code 92660-4266
 Date of Receipt 08 / 31 / 2011
 Transaction ID: PR407278126506
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)
 FEC ID number of contributing federal political committee. C
 Name of Employer PLACENTIA LINDA HOSPITAL Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 684.00

SUBTOTAL of Receipts This Page (optional) ▶ 232.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
GARY J SLOAN

Mailing Address 615 STEVENS CT

City State Zip Code
DANVILLE CA 94506-4805

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SAN RAMON REGION MEDICAL CENTER CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 342.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR407278826506

Amount of Each Receipt this Period
38.00

P/R Deduction (\$19.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
CANDACE MARKWITH

Mailing Address 980 ISABELLA WAY

City State Zip Code
SAN LUIS OBISPO CA 93405-6186

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SIERRA VISTA REGIONAL MEDICAL CENTER CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 696.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR407280326506

Amount of Each Receipt this Period
78.00

P/R Deduction (\$39.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
RODNEY A REASONER

Mailing Address 1960 MARY LEE LN

City State Zip Code
ALLEN TX 75002-8528

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TENET HEALTHCARE CORPORATION VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 684.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR407280926506

Amount of Each Receipt this Period
76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 192.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 39
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICHELE M FINNEY

Mailing Address 21521 TURTLEDOVE STREET

City State Zip Code
TRABUCO CANYON CA 92679-3486

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LOS ALAMITOS MEDICAL CENTER CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 684.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR407283926506

Amount of Each Receipt this Period
76.00

P/R Deduction (\$38.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
KEN WHEAT

Mailing Address 38041 E. BOGERT TRAIL

City State Zip Code
PALM SPRINGS CA 92264-9638

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DESERT REGIONAL MEDICAL CENTER COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 684.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR407288726506

Amount of Each Receipt this Period
76.00

P/R Deduction (\$38.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
RICK LYONS

Mailing Address 2425 BATTERING ROCK RD

City State Zip Code
TEMPLETON CA 93465-8371

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TWIN CITIES COMMUNITY HOSPITAL CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 348.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR413941926506

Amount of Each Receipt this Period
38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **190.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) KENNETH F SUTHERLAND		Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 102 WILMINGTON CT		Transaction ID: PR839152226506
	City SOUTHLAKE	State TX	Zip Code 76092-8492
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.00
	Name of Employer TENET HEALTHCARE CORPORATION	Occupation VP	P/R Deduction (\$38.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 684.00		

B.	Full Name (Last, First, Middle Initial) LINDA K MERCIER		Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 14 COLUMBIA CREST PLACE		Transaction ID: PR839173326506
	City WOODLANDS	State TX	Zip Code 77382-1334
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.00
	Name of Employer HOUSTON NW MEDICAL CENTER	Occupation COO	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00		

C.	Full Name (Last, First, Middle Initial) PATRICIA C JOHNSON		Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 4616 LARGO DR.		Transaction ID: PR839196426506
	City FLOWER MOUND	State TX	Zip Code 75028-3936
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer TENET HEALTHCARE CORPORATION	Occupation VP HUMAN RESOURCES	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

SUBTOTAL of Receipts This Page (optional)	▶	154.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 39
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
EDWARD MESCO

Mailing Address 7365 NW 54TH STREET

City LAUDERHILL State FL Zip Code 33319-6346

FEC ID number of contributing federal political committee. **C**

Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 31 / 2011
Transaction ID: PR839477826506
Amount of Each Receipt this Period 50.00
P/R Deduction (\$25.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
KEM M MULLINS

Mailing Address 10101 FRENCH SPRINGS RD

City LAKELAND State TN Zip Code 38002-8425

FEC ID number of contributing federal political committee. **C**

Name of Employer SAINT FRANCIS HOSPITAL-BARTLETT Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2011
Transaction ID: PR839557426506
Amount of Each Receipt this Period 38.00
P/R Deduction (\$19.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
AUDREY T ANDREWS

Mailing Address 702 PENFOLDS

City COPPELL State TX Zip Code 75019-4544

FEC ID number of contributing federal political committee. **C**

Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, CHIEF COMPLIANCE OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3456.00

Date of Receipt 08 / 31 / 2011
Transaction ID: PR840566926506
Amount of Each Receipt this Period 384.00
P/R Deduction (\$192.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 472.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DREW P KAHN

Mailing Address 16015 KEMPTON PARK

City State Zip Code
SPRING TX 77379-6730

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOUSTON NW MEDICAL CENTER CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 684.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 1

Transaction ID: PR840590426506

Amount of Each Receipt this Period
76.00

P/R Deduction (\$38.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
DEBORAH DALEY

Mailing Address PO BOX 757

City State Zip Code
EDGEWOOD TX 75117-0757

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TENET HEALTHCARE CORPORATION ADMINISTRATIVE ASSISTANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 1

Transaction ID: PR840706226506

Amount of Each Receipt this Period
40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
CRYSTAL L HAYNES

Mailing Address 3924 FLORA PLACE

City State Zip Code
ST. LOUIS MO 63110-3733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SAINT LOUIS UNIVERSITY HOSPITAL CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 702.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 1

Transaction ID: PR840796026506

Amount of Each Receipt this Period
78.00

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

194.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) DAVID W BORDOFSKE	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 5001 ASHLAND BELLE LANE	Transaction ID: PR840924626506
	City State Zip Code FRISCO TX 75035-7682	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation TENET HEALTHCARE CORPORAT-ION VP	
	Receipt For: Aggregate Year-to-Date <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 720.00	P/R Deduction (\$40.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) MARITA COVARRUBIAS	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 7115 WILDGROVE AVE	Transaction ID: PR841446726506
	City State Zip Code DALLAS TX 75214-3841	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation TENET HEALTHCARE CORPORAT-ION VP & ASST GENERAL COUNSEL	
	Receipt For: Aggregate Year-to-Date <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 228.00	P/R Deduction (\$19.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) TREVOR FETTER	Date of Receipt MM / DD / YYYY 08 / 31 / 2011
	Mailing Address 3821 BEVERLY DRIVE	Transaction ID: PR841482526506
	City State Zip Code DALLAS TX 75205-2807	Amount of Each Receipt this Period 666.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation TENET HEALTHCARE CORPORAT-ION CEO AND PRESIDENT	
	Receipt For: Aggregate Year-to-Date <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2331.00	P/R Deduction (\$333.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	784.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
HUILING ZHANG

Mailing Address 2901 DANIEL AVE

City State Zip Code
DALLAS TX 75205-1515

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TENET HEALTHCARE CORPORAT- SR DIR
ION

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 342.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 1

Transaction ID: PR841724226506

Amount of Each Receipt this Period
38.00

P/R Deduction (\$19.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
DEBBIE FOWLER

Mailing Address 5018 SHADY GLEN

City State Zip Code
GARLAND TX 75043-2918

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TENET HEALTHCARE CORPORAT- MGR
ION

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 289.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 1

Transaction ID: PR842079526506

Amount of Each Receipt this Period
17.00

P/R Deduction (\$17.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
JOHN TILLY

Mailing Address 1221 WENTWOOD

City State Zip Code
IRVING TX 75061-4456

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TENET HEALTHCARE CORPORAT- VP & ASST GENERAL COUNSEL
ION

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 1

Transaction ID: PR842232426506

Amount of Each Receipt this Period
150.00

P/R Deduction (\$75.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 205.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
ELIZABETH JOHNSON

Mailing Address 3302 MARSH LANE

City State Zip Code
GRAPEVINE TX 76051-6828

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TENET HEALTHCARE CORPORATION VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 684.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR842373126506

Amount of Each Receipt this Period
76.00

P/R Deduction (\$38.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
LESTER G COTTLE

Mailing Address 1625 FAWN LN

City State Zip Code
HUNTINGDON VALLEY PA 19006-7917

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ST CHRISTOPHER'S HOSPITAL FOR CHILDREN CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR843874926506

Amount of Each Receipt this Period
38.00

P/R Deduction (\$19.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
MANUEL LINARES

Mailing Address 7710 CENTER BAY DR

City State Zip Code
NORTH BAY VILLAGE FL 33141-4019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORTH SHORE MEDICAL CENTER CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 684.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2011

Transaction ID: PR844477226506

Amount of Each Receipt this Period
76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **190.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) PATRICIA L BRAINERD		Date of Receipt
	Mailing Address 5412 GLENSHIRE DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 31 / 2011
	City	State	Zip Code
	PLANO	TX	75093-2800
	FEC ID number of contributing federal political committee. C		Transaction ID: PR844644426506
Name of Employer TENET HEALTHCARE CORPORATION		Occupation SR DIR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00	<input type="text"/> 100.00
			P/R Deduction (\$50.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) STEVEN B BARR		Date of Receipt
	Mailing Address 1300 BINZ		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 31 / 2011
	City	State	Zip Code
	HOUSTON	TX	77004-7016
	FEC ID number of contributing federal political committee. C		Transaction ID: PR844656626506
Name of Employer PLAZA SPECIALTY HOSPITAL		Occupation CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 342.00	<input type="text"/> 38.00
			P/R Deduction (\$19.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) THOMAS I RUNKLE		Date of Receipt
	Mailing Address 868B PENNOCK ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 31 / 2011
	City	State	Zip Code
	PHILADELPHIA	PA	19130-1234
	FEC ID number of contributing federal political committee. C		Transaction ID: PR844712826506
Name of Employer HAHNEMANN UNIVERSITY HOSPITAL		Occupation DIRECTOR OF OPERATIONS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 323.00	<input type="text"/> 38.00
			P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 176.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 39
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICHAEL J KING

Mailing Address 2713 STUYVESANT CR

City State Zip Code
MODESTO CA 95356-0337

FEC ID number of contributing federal political committee. **C**

Name of Employer DOCTORS MEDICAL CENTER-MODESTO Occupation COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2011

Transaction ID: PR847417826506

Amount of Each Receipt this Period 38.00

P/R Deduction (\$19.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
STEVEN G WASSERMAN

Mailing Address 6132 DEERHILL RD

City State Zip Code
OAK PARK CA 91377-5832

FEC ID number of contributing federal political committee. **C**

Name of Employer CAP MANAGEMENT SYSTEMS Occupation CHIEF INFO OFFICER-CMS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2011

Transaction ID: PR847970126506

Amount of Each Receipt this Period 38.00

P/R Deduction (\$19.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
MONICA C VARGAS

Mailing Address 4017 FLAMINGO

City State Zip Code
EL PASO TX 79902-1313

FEC ID number of contributing federal political committee. **C**

Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2011

Transaction ID: PR849126626506

Amount of Each Receipt this Period 38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **114.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 39 / 39	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) JAMES CLEMENTS		Date of Receipt	
	Mailing Address 3013 GOLF CREST LANE		M M / D D / Y Y Y Y 08 / 31 / 2011	
	City	State	Zip Code	Transaction ID: PR849790226506
	WOODSTOCK	GA	30189-8197	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		76.00	
Name of Employer SOUTH FULTON MEDICAL CENTER		Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 684.00		
				P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	76.00
TOTAL This Period (last page this line number only)	8821.00